

Honda Canadian Oil Dilution Class Action
c/o RicePoint Administration Inc.
P.O. Box 4454, Toronto Station A
25 The Esplanade
Toronto, ON M5W 4B1



HOQ

SKYE V. HONDA NORTH AMERICA, INC. ET AL.
ONTARIO SUPERIOR COURT OF JUSTICE
Court File No. 1713/18

Claim Form

CLAIMANT INFORMATION

First Name				M.I.	Last Name			
Primary Address								
Primary Address Continued								
City				Province		Postal Code		

Instructions:

To submit a Claim, you must:

- a. Truthfully, accurately, and fully complete and submit this Claim Form; AND
- b. Submit Proof of Expenses; AND
- c. During the Claims Period, submit your Claim by 60 days after the Effective Date by:
Mailing it to the Settlement Administrator at:

Honda Canadian Oil Dilution Class Action
c/o RicePoint Administration Inc.
P.O. Box 4454, Toronto Station A
25 The Esplanade
Toronto, ON M5W 4B1

OR

Submit it through the Settlement Website at www.hondaodcsettlement.ca

The Claims Period ends 60 days after the Effective Date. The Effective Date is not yet known, but will be posted on the Settlement Website www.hondaodcsettlement.ca.

IMPORTANT: KEEP A COPY OF YOUR COMPLETED CLAIM FORM AND PROOF OF EXPENSES. ANY DOCUMENTS YOU SUBMIT WITH YOUR CLAIM WILL NOT BE RETURNED.

DO NOT SUBMIT YOUR CLAIM FORM TO THE COURT. If you have questions regarding this Settlement, contact the Settlement Administrator. Questions may be sent by mail or email addressed to the Settlement Administrator, or you may call 866-757-7817.



FOR CLAIMS PROCESSING ONLY	OB <input type="checkbox"/>	CB <input type="checkbox"/>	<input type="radio"/> DOC <input type="radio"/> LC <input type="radio"/> REV	<input type="radio"/> RED <input type="radio"/> A <input type="radio"/> B
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Part 4 – Reimbursement for Oil Change Expenses

1. Did you pay for past oil changes as a direct result of Oil Dilution Condition?
 Yes No
2. Had you complained about the Oil Dilution Condition to Honda Canada or an authorized Honda dealer at any time before the oil change?
 Yes No
3. Was the oil change done on or before 8,000 kilometers from the prior oil change?
 Yes No
4. Are you including Proof of Expenses with this Claim for past oil changes you incurred as a direct result of Oil Dilution Condition?
 Yes No
5. Are you including with your Proof of Expenses a copy of proof that you changed the oil on or before 8,000 kilometers from the prior oil change because of Oil Dilution Conditions?
 Yes No

If you answered “No” to any of the questions above, you are NOT eligible to submit a Claim under Part 4.

If you answered “Yes” to all of the questions in Part 4, please complete the following:

MM / DD / YYYY

Date of Oil Change

\$ [] [] [] . [] []

Amount Paid for Oil Change

When did you complain about the Oil Dilution Condition to Honda Canada or an authorized Honda dealer before the oil change?

[]

Part 5 – Reimbursement for Diagnostic Costs

1. Did you pay for diagnostic costs relating to Oil Dilution Condition?
 Yes No
2. Do you have documentation from Honda Canada or an authorized Honda dealer verifying these past diagnostics related to the Oil Dilution Condition?
 Yes No
3. Are you including Proof of Expenses with this Claim for past diagnostic costs you incurred as a direct result of Oil Dilution Condition?
 Yes No
4. Are you including with your Proof of Expenses a copy of your documentation from Honda Canada or an authorized Honda dealer verifying these past diagnostics related to the Oil Dilution Condition?
 Yes No

If you answered “No” to any of the questions above, you are NOT eligible to submit a Claim under Part 5.

If you answered “Yes” to all of the questions in Part 5, please complete the following:

MM / DD / YYYY

Date diagnostic costs were incurred

\$ [] [] [] . [] []

Amount paid for diagnostic costs (This reimbursement is capped at CA\$325)

When were your diagnostics verified by Honda Canada or an authorized Honda dealer?

[]



Part 6 – Certification

I affirm, under penalty of perjury and under the laws of Canada, that the information in this Claim Form is true and correct to the best of my knowledge, information, and belief, and that I am the sole and exclusive owner of all claims being released by the Settlement. I understand that my Claim Form and the Proof of Expenses submitted therewith may be subject to audit, verification, and review by the Settlement Administrator and Court. I also understand that, if my Claim Form or Proof of Expenses is found to be fraudulent or unverifiable, I will not receive any payment.

CONSENT—PLEASE READ CAREFULLY: Notwithstanding any current or prior election to opt in or opt out of receiving calls or SMS messages (including text messages) from Honda Canada Inc. (Honda Canada) its agents, representatives, affiliates, or anyone calling on Honda Canada’s behalf, you expressly consent to be contacted by Honda Canada, its agents, representatives, affiliates, or anyone calling on Honda Canada’s behalf for any and all purposes arising out of or relating to your Claim under the Settlement in the *Skye v. Honda North America, Inc.* litigation, at any telephone number, or physical or electronic address you provide or at which you may be reached. You agree Honda Canada, its agents, representatives, affiliates, or anyone calling on Honda Canada’s behalf may contact you in any way, including SMS messages (including text messages), calls using prerecorded messages or artificial voice, and calls and messages delivered using an auto telephone dialing system or an automatic texting system. Automated messages may be played when the telephone is answered, whether by you or someone else. In the event that an agent or representative calls, he or she may also leave a message on your answering machine, voice mail, or send one via text.

I executed this Claim Form on: ____ (day), _____ (month), _____ (year) in _____ (city, province), Canada

Signature: _____

Print Name: _____

PROCESSING CLAIMS WILL TAKE TIME. Claims will not be processed until after the Effective Date, and no money will be issued until after the Effective Date of this Settlement.

PLEASE CHECK THE SETTLEMENT WEBSITE PERIODICALLY FOR UPDATES ON THE STATUS OF THE SETTLEMENT. THANK YOU FOR YOUR PATIENCE.

CHECKLIST

Please make sure you have:

1. Filled out the Claimant Information in Part 1;
2. Answered the Vehicle Information in Part 2;
3. Identified all costs you are claiming in Parts 3, 4 and 5;
4. Completed the Certification in Part 6;
5. Attached your Proof of Expenses;
6. Kept a copy of your completed Claim Form and the Proof of Expenses you submitted with your Claim Form for your records; and
7. Mailed your Claim Form and Proof of Expenses to the address below:

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